STATEMENT OF ORGANIZATION

FOR POLITICAL COMMITTEES AND PARTY COMMITTEES (See Reverse Side For Instructions) CON THURS NEW TO This is a (Check one) Party Committee X Political Committee This is an (Check one) Initial Statement X Amended Statement 心理者 15% (Please Type or Print) COMMITTEE Name Kansas Medical Society Political Action Committee Mailing Address (Street, City, State, Zip Code) Business Telephone (785) 235-2383 623 SW 10th Ave., Topeka KS 66612 CHAIRPERSON Name Home Telephone Frank Griffith MD (785) 823-6626 Mailing Address (Street, City, State, Zip Code) Business Telephone (785)827-0448 1493 E. Iron, Salina, KS 67401 TREASURER Name Home Telephone C. Richard Bonebrake, MD (78) 232-2433 Mailing Address (Street, City, State, Zip Code) Business Telephone 623 SW 10th Ave., Topeka, KS 66612 (785) 295-5330 AFFILIATED OR CONNECTED ORGANIZATIONS Name Kansas Medical Society Mailing Address (Street, City, State, Zip Code) 623 SW 10th Ave., Topeka, KS 66612

SIGNATURE:

contributors.

"I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."

If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the

(Date) 21,1998

(Signature of Chairperson)

Kansas Governmental Ethics Commission